

PART B—ISSUE FEE TRANSMITTAL

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DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Box Issue Fee, Assistant Commissioner for Patents, Washington D.C. 20231

1. CORRESPONDENCE ADDRESS 24M1/0303

MARK A HAYNES
WILSON, SONSINI, GOODRICH & ROSATI
650 PAGE MILL ROAD
PALO ALTO CA 94304

2. INVENTOR(S) ADDRESS CHANGE (Complete only if there is a change)

INVENTOR'S NAME

Street Address

City, State and Zip Code

CO-INVENTOR'S NAME

Street Address

City, State and Zip Code

Check if additional changes are enclosed

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APPLICATION NO.	FILING DATE	TOTAL CLAIMS	EXAMINER AND GROUP ART UNIT	DATE MAILED
08/243,046	05/16/94	011	LUU, M	2415 03/03/97
First Name Applicant	BRANSCOMB, HILL			

TITLE OF APPARATUS AND METHOD FOR ASSEMBLING CONTENT ADDRESSABLE VIDEO INVENTION

ATTY'S DOCKET NO.	CLASS-SUBCLASS	BATCH NO.	APPLN. TYPE	SMALL ENTITY	FEES DUE	DATE DUE
2 ADIN79143MAH	345-185.000	K13	UTILITY	YES	\$645.00	06/03/97

3. Correspondence address change (Complete only if there is a change)

08/07/1997 FCHARLES 00000037 DAI:232415 08243046
01 FC:242 645.00 CH

5. ASSIGNMENT DATA TO BE PRINTED ON THE PATENT. (print or type)

(1) NAME OF ASSIGNEE:

Advanced Interaction Inc.

(2) ADDRESS: (CITY & STATE OR COUNTRY)

3234 Washington Street, San Francisco, CA 94115

A This application is NOT assigned.

Assignment previously submitted to the Patent and Trademark Office.

Assignment is being submitted under separate cover. Assignment should be directed to Box ASSIGNMENTS.

PLEASE NOTE: Unless an assignee is identified in Block 5, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the PTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

4. For printing on the patent front page, list the names of not more than 3 registered patent attorneys or agents OR, alternatively, the name of a firm having as a member a registered attorney or agent. If no name is listed, no name will be printed.

1 _____

2 _____

3 _____

6a. The following fees are enclosed:

Issue Fee Advance Order - # of Copies _____

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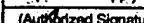
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Any Deficiencies in Enclosed Fees

The COMMISSIONER OF PATENTS AND TRADEMARKS is requested to apply the Issue Fee to the application identified above.

(Authorized Signature) 

(Date) 

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I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Box ISSUE FEE

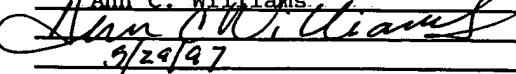
Assistant Commissioner for Patents
Washington, D.C. 20231

on: 29 May 1997

(Date)

Ann C. Williams

(Name of person making deposit)


Ann C. Williams
29 May 1997

(Signature)

(Date)

1. TRANSMIT THIS FORM WITH FEE